| <b>Application</b> | or Docket | Number    |
|--------------------|-----------|-----------|
| Application        | OI DOCKEL | TAGILLOCI |

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

60/88-731

| CLAIMS AS FILED - PART I                                    |  |   |             |                                |                      |                                |           | SMALL ENTITY        |                        |           | THAN                |                        |
|---|--|---|-------------|--------------------------------|----------------------|--------------------------------|-----------|---------------------|------------------------|-----------|---------------------|------------------------|
| (Column   |  |   |             | 1)                             | (Column 2)           |                                | T         | TYPE                |                        | OR        | SMALL ENTITY        |                        |
| TOTAL CLAIMS  |  | 14  |             |                                |                      |                                | RATE      | FEE                 |                        | RATE      | FEE                 |                        |
| FOR NUMBER  |  |   | FILED       | NUMBER EXTRA                   |                      |                                | BASIC FEE | 385.00              | OR                     | BASIC FEE | 770.00              |                        |
| TOTAL CHARGEABLE CLAIMS / minus 20=                         |  |   | . 0         |                                |                      | X\$ 9=                         |           | OR                  | X\$18=                 |           |                     |                        |
| INDEPENDENT CLAIMS  |  |   |             | * 0                            |                      |                                | X43=      |                     | OR                     | X86=      |                     |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT                            |  |   |             |                                |                      |                                | +145=     |                     | OR                     | +290=     |                     |                        |
| * If the difference in column 1 is less than zero, enter "C |  |   |             |                                | "0" in c             | olumn 2                        | L         | TOTAL               |                        | OR        | TOTAL               | 770                    |
|   | C  | LAIMS AS A                                | MENDED      | - PAR                          | TII                  |                                |           | •                   |                        | •         | OTHER               | THAN                   |
|   | •  | (Column 1)                                |             | (Colur                         |                      | (Column 3)                     |           | SMALL E             | NTITY                  | OR.       | SMANL               | ENTITY                 |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY         | PRESENT<br>EXTRA               |           | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus       | **                             |                      | =                              |           | X\$ 9=              |                        | OR        | X\$18=              |                        |
|   | Independent  | *   | Minus       | ***                            | - 01 414             | =                              |           | X43=                |                        | OR        | X86=                |                        |
|   | FIRST PRESE  | NTATION OF MU                             | JETIPLE DEF | PENDENI                        | CLAIM                |                                |           | +145=               |                        | OR        | +290=               |                        |
|   |  |   |             |                                |                      |                                | L         | TOTAL<br>DDIT. FEE  |                        | OR        | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                |             | (Colur                         | mn 2)                | (Column 3)                     | ^         | ODII. I LL          |                        | ,         |                     |                        |
| AMENDMENT B   |  | CLAIMS REMAINING AFTER AMENDMENT          |             | HIGH<br>NUM<br>PREVIO          | IEST<br>BER<br>DUSLY | PRESENT<br>EXTRA               |           | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus       | **                             |                      | =                              |           | X\$ 9=              |                        | OR        | X\$18=              |                        |
|   | Independent  | *   | Minus       | ***                            |                      | =                              |           | X43=                |                        | OR        | X86=                |                        |
| L   | FIRST PRESE  | NTATION OF MU                             | JETIPLE DEI | PENDEN                         | CLAIM                |                                |           | +145=               |                        | OR        | +290=               |                        |
|   |  |   |             |                                |                      |                                | L         | TOTAL<br>ADDIT. FEE |                        | OR        | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Oali                                     |             | (Colum                         | mn (1)               | (Column 3)                     | -         | NDDII. FEE          |                        |           | 70011.122           |                        |
| _   |  | (Column 1)<br>CLAIMS                      |             | (Colui                         |                      |                                | lr        |                     | ADDI-                  | 1         |                     | ADDI-                  |
| AMENDMENT C   |  | REMAINING<br>AFTER<br>AMENDMENT           |             | PREVI                          | BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA               |           | RATE                | TIONAL                 |           | RATE                | TIONAL                 |
|   | Total  | *   | Minus       | **                             |                      | =                              |           | X\$ 9=              |                        | OR        | X\$18=              |                        |
|   | 1  |   | <del></del> |                                |                      | =                              | 1 H       |                     |                        |           |                     | <del> </del>           |
| M   | Independent  | *   | Minus       | ***                            |                      |                                | 1 1       | X43=                |                        | O'D       | X86=                |                        |
| AME   | Independent  | *<br>ENTATION OF M                        | <u> </u>    | <u> </u>                       | T CLAIM              |                                | ┪┟        | X43=                |                        | OR        | X86=                |                        |
| <u> </u>  | Independent<br>FIRST PRESE                                       | I<br>ENTATION OF M                        | ULTIPLE DE  | PENDEN                         |                      |                                | }         | +145=               |                        | OR<br>OR  | +290=               |                        |
| <u>.</u>  | Independent FIRST PRESE  If the entry in colu If the "Highest Nu |   | ULTIPLE DE  | PENDEN  Jmn 2, write IS SPACE  | e "0" in co          | olumn 3.<br>In 20, enter "20." |           |                     |                        |           |                     |                        |